



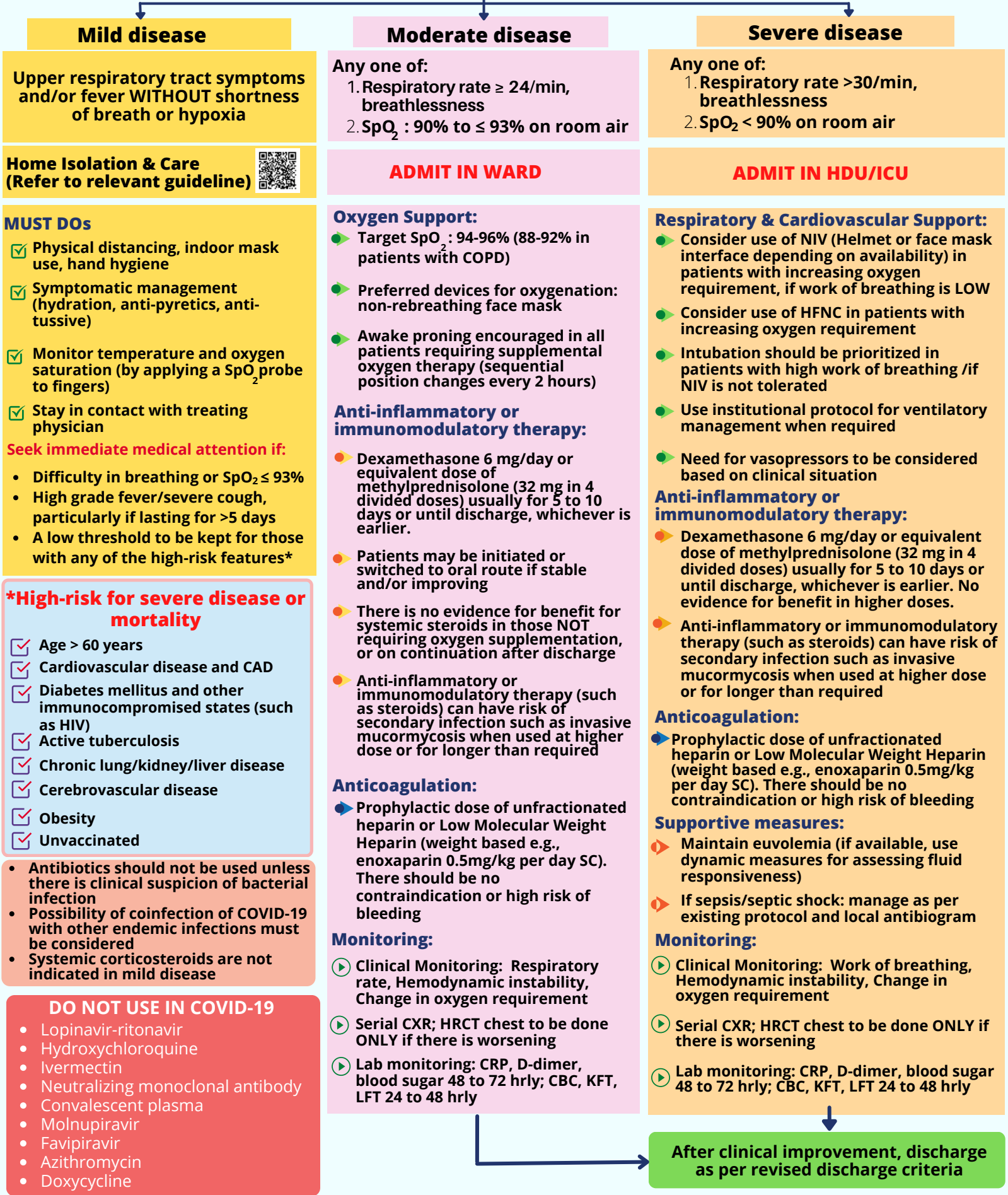
AIIMS/ ICMR-COVID-19 National Task Force/ Joint Monitoring Group (Dte.GHS)

Ministry of Health & Family Welfare, Government of India

CLINICAL GUIDANCE FOR MANAGEMENT OF ADULT COVID-19 PATIENTS

Revised on 05/01/2023

Adult patient diagnosed with COVID-19



Additionally in moderate or severe disease at high risk of progression

Consider Remdesivir for up to 5 days (200 mg IV on day 1 followed by 100 mg IV OD for next 4 days)

- To be started within 10 days of onset of symptoms, in those having moderate to severe disease with high risk of progression (requiring supplemental oxygen), but who are NOT on IMV or ECMO
- No evidence of benefit for treatment more than 5 days
- NOT to be used in patients who are NOT on oxygen support or in home setting
- Monitor for RFT and LFT (remdesivir not recommended if eGFR $<$ 30 ml/min/m²; AST/ALT $>$ 5 times UNL) (not an absolute contraindication)

Additionally in rapidly progressing moderate or severe disease

Consider Tocilizumab preferably within 24-48 hours of onset of severe disease/ ICU admission [4 to 6 mg/kg (400 mg in 60 kg adult) in 100 ml NS over 1 hour] if the following conditions are met:

- Rapidly progressing COVID-19 not responding adequately to steroids and needing oxygen supplementation or IMV
- Preferably to be given with steroids
- Significantly raised inflammatory markers (CRP and/or IL-6)
- Rule out active TB, fungal, systemic bacterial infection
- Long term follow up for secondary infections (such as reactivation of TB, flaring of Herpes)